FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		ORGANIZATION											
	•••		(See in	nstruction	s)					Office use	only		
1. NAME OF COMMITT	: 「EE (in f	ull)	(Check if n is changed			nple: If typyin the lines	ig, type	12FE	4M5				
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ADDRESS (nun	nber and s	treet)	700 13th Stree	et, NW	ш			шш				111	
(Check if	address		Suite 600	111					11	111	111	111	
is changed)			Washington						L	20	20005 -		
					CITY			STATE	•	2	ZIP CODE	_	
COMMITTEE'S	S E-MAII	_ ADDRESS	S (Please provide onl	y one e-m	nail addre	ess)							
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COMMITTEE'S	SWERF	PAGE ADDI	RESS (UBL)										
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2. DATE	м м 1 2	/ D [2010	′									
3. FEC IDEN	ITIFICA	TION NUME	ER	C	C00	365270							
4. IS THIS S	TATEM	ENT	NEW (N)	OR	X	AMEN	DED (A)						
I certify that I hav	e examir	ned this State	ment and to the best o	of my know	vledge an	d belief it is tru	ue, correct a	nd complete	Э				
Type or Print N	ame of 7	Γreasurer	Tracy New	man									
Signature of Tre	easurer	Electroni	cally Filed by Tra	cy New	man			Date	1 2	/ D 1	4 / Y	ý 0 [°] 1 (
NOTE: Submiss	ion of fals		, or incomplete inform								S.C. §437	g.	
Offic	ce					For further i							
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